Instructions for becoming Act 144 Certified

Enclosed you will find an application for certification of a fire alarm and/or fire suppression firm and a qualifying person affidavit of a fire alarm and/or fire suppression firm. The following are instructions as to how to complete these forms, as well as, what documentation must accompany each application.

Application for Certification Fire Alarm and/or Fire Suppression Firm

This application requires information regarding the firm that is requesting fire alarm and/or fire suppression certification. The first section requests information relating to the firm including whether the firm is licensed under 1984 PA 192 and/or 1956 PA 217. The second section requests, for each qualifying person, the full name, signature and codes/categories for which each person is qualified. The third section must be signed by the chief operating officer/branch officer. The last section must be notarized by a notary public indicating that the information listed is accurate.

This form must be accompanied by a qualifying person affidavit for each qualifying person, along with supporting documentation, and a separate \$100.00 fee for Fire Alarm or \$150.00 fee for Fire Suppression for each certification.

Qualifying Person Affidavit Fire Alarm and/or Fire Suppression Firm

Each certified firm must have at least one qualifying person. To become a qualifying person, an individual must demonstrate in a technical resume⁽¹⁾ that he or she has the technical qualifications⁽²⁾ for the categories requested.

This affidavit is used to determine if a person has the experience to be considered a qualifying person for a fire alarm and/or fire suppression firm. The first section requests information relating to the individual person, as well as, the name of the firm they will be working for. The second and third sections request information relating to which codes/categories you have met the education/experience requirements for. The fourth section requests the printed name, signature and date of the qualifying person. The last section must be notarized by a notary public indicating the information listed is accurate.

Each completed form must be accompanied by supporting documentation to determine if you meet the education, experience and licensing requirements for each category. The following are examples of supporting documentation:

- Technical Resume (notarized and signed) must be included
- Copies of any Michigan Licenses and Certifications
- Copy of NICET II Certification for fire alarm categories
- Copy of NICET III Certification for fire suppression categories
- Copies of Degrees and Transcripts
- Training Program Certificates and Course Study Outline

(1) A technical resume should include dates, locations, systems installed, contact persons and telephone numbers where the work was performed. A technical resume must also include an individual's educational and work experience, including names, addresses and telephone numbers of contact persons. Copies of diplomas, training received (duration and specific course content) and certifications are essential to substantiate claims made on the resume.

⁽²⁾Technical qualification means the knowledge of applicable codes, standards and laws and the practical knowledge of equipment, materials, methods and theory of operation as they relate to fire alarm or fire suppression systems, the combination of which, when applied to a facility under the jurisdiction of the Bureau of Construction Codes & Fire Safety, shall result in a properly operating required fire alarm or fire suppression system which is acceptable to the Bureau of Construction Codes & Fire Safety.

If you have any questions, please contact the Electrical Division at (517) 241-9320 or the Mechanical Division at (517) 241-9325.

Application for Certification

Fire Alarm/Fire Suppression Firm
Michigan Department of Labor & Economic Growth Bureau of Construction Codes & Fire Safety

Electrical Division / Mechanical Division

	Electric	al Division	n / Mechanica	al Division	AGENCY USE ONLY
			Box 30255	a. 2	
			g, MI 48909		
Fire Alarm Firm \$100.00	51		20 / 517/241-	9325	
Fire Suppression Firm \$150.00	31	1/2-1 332	20/31//241	3323	
FIRM NAME (PARENT NAME IF CORPORATION CERTIFICATION DESIRED)			CONTRACTOR LICENSE NUMBER (If Applicable)		CERTIFICATION NUMBER
MAILING ADDRESS (STREET)				TELEPHONE NUMBER	EXPIRATION DATE
CITY	COUNTY		STATE	ZIP CODE	
QUALIFYING PERSON					CERTIFICATION NUMBER
QUALIFYING PERSON					CERTIFICATION NUMBER
MAILING ADDRESS (STREET)				TELEPHONE NUMBER	EXPIRATION DATE
WALLING ADDITION (OTREET)				TELET HONE NOMBER	EXIMATION BATE
CITY	COUNTY		STATE	ZIP CODE	
	CODES/CATI	ECODIES E	OD WHICH EIDI	M IS QUALIFIED	
	CODES/CATE	LGONILGI	OK WINGITT IKI	W 13 QUALITIED	
A. Design fire alarm system					
B. Install fire alarm system					
C. Design fire suppression system					
D. Install fire suppression system					
E. Other (explain)					
		QUALI	FYING PERSON	NS	
Full Name (Type or Print)		Signature		1	Category Codes
. •	,				0 ,
	CHIEF OPE	RATING OF	FICER OR BRA	NCH OFFICER	
				quired fire suppression sy	stems within 24 hours and replacement
parts are available for required alarm	systems or required fire su	uppression s	systems.		·
NAME OF CHIEF OPERATING OFFICER OR BRA	ANCH OFFICER (Print or Type)	SIGNATURE			DATE
		NOTA	ARY PUBLIC		·
Outros the development to force and the	.1-	(- Note to Dublic to and
Subscribed and sworn before me, this		ly of		· · · · · · · · · · · · · · · · · · ·	, a Notary Public in and
for					County, Michigan.
			My Comp	nission expires:	
(Signature of	Notary Public)		,	сон охриоо.	
ttach Qualifying Person Affidavit fo	rm and technical qualif	ications res	sume for each	new qualifying person	Submit this form with the appropriate

fee to the address listed above.

Based on the information provided, the above named firm is hereby granted certification in accordance with 1941 PA 207.				
AUTHORIZED DIVISION SIGNATURE	DATE			

The Department of Labor & Economic Growth will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability, or political beliefs. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.